

MINNESOTA WING CIVIL AIR PATROL REIMBURSEMENT REQUEST FOR MEMBERS

TO: <input type="checkbox"/> WING COMMANDER <input type="checkbox"/> WING VICE COMMANDER <input type="checkbox"/> CHIEF OF STAFF					DATE:																																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">TRAVEL EXPENSES: DATE</th> <th style="width: 25%;">DESTINATION</th> <th style="width: 10%;">MODE OF TRAVEL</th> <th style="width: 10%;">VEH MILES /FLT HRS</th> <th style="width: 30%;">PURPOSE</th> <th style="width: 10%;">COST</th> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr> <td colspan="3" style="text-align: right;">TOTAL MILES OR HOURS:</td> <td> </td> <td>SUBTOTAL FOR TRAVEL:</td> <td> </td> </tr> </table>							TRAVEL EXPENSES: DATE	DESTINATION	MODE OF TRAVEL	VEH MILES /FLT HRS	PURPOSE	COST																															TOTAL MILES OR HOURS:				SUBTOTAL FOR TRAVEL:	
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Refer to MNWG SUPP 1, CAPM 173-2 for procedures.				GRAND TOTAL:																																												
PAYABLE TO: THESE EXPENSES WERE FOR THE DIRECT BENEFIT OF CIVIL AIR PATROL. REQUESTOR'S SIGNATURE:				ADDRESS: DEPARTMENT DIR:																																												
WING CC/CV/CS:																																																
MNWG FINANCE USE ONLY:				CHECK #		AMOUNT: \$	DATE:																																									